



## 18<sup>TH</sup> EHEALTH NETWORK 12-13 NOVEMBER 2020, BRUSSELS, BELGIUM

### COVER NOTE

#### 13.2 **Building Sustainable Digital Health Services in Europe: Lessons Learned from the COVID-19 Pandemic**

##### 1. Issue at stake

COVID-19 has posed significant challenges and has highlighted many weaknesses in the health and social care systems of countries around the world. Faced with an international public health emergency a nation's ability to generate, share and use reliable information efficiently and across national borders timely has been shown to be of critical importance. However, the majority of public health systems have been found to be lacking the level of digital data structuring, necessary infrastructure and operational systems and processes to do so. On the one hand, the pandemic has placed pressure on all agencies and building blocks of a health system: governance, financing, service delivery, medicines and equipment, health workforce and health information. On the other hand, the same challenges faced by healthcare systems at a time of extreme crisis have proven to be an outstanding driver of change.

On the 15th of September 2020, the Croatian Ministry of Health and the Directorate-General for Structural Reform Support of the European Commission of the EU organised a workshop "Building survivable eHealth strategies during crisis" to share the knowledge on how to develop a resilient eHealth strategy for the 2021-2027 Multiannual Financial Framework. The workshop gathered a broad range of digital health experts from national health ministries, health care facilities, informatics, including representatives of DG REFORM funded projects.

This paper presents several eHealth innovations developed and used at local and national levels to help coping with the COVID-19 world pandemic in spring 2020 and provides a handful of practical recommendations and action points to the EU and national stakeholders.

##### 2. Summary

All of the countries are faced with similar epidemiological and demographic challenges. Multi-morbidity at younger age increases, health systems are not prepared to manage chronic multi morbid patients as they are built around historic acute, episodic model of care. Too many health care systems are still doctor and not patient centred, based on hospitals not on systems thinking; where knowledge is not managed adequately. Patients are required to navigate through complex health systems. Healthcare itself is data rich but information quality is poor. Therefore, health care is in need of innovative solutions. Technology and innovation are here but what is lacking is a cultural change. Adoption can be facilitated by a long-term strategy and a robust existing/future infrastructure. However, in Europe we need to safely introduce new technologies in the system, we need to build up a digital and sustainable system (digital does not mean getting rid of paper), improve clinical practice and preserve patient's privacy. Nevertheless, the solutions need

to be translated into the system and the change does not happen overnight. It is a long-term process that initially requires visionary thinkers and then perseverant leaders to make it a reality, except in extraordinary situations such as the current pandemic.

### **3. Format of procedure in the meeting**

For information